TOWN OF TRURO **PLANNING BOARD**

Application for Temporary Sign Permit

Pursuant to Section 11 of the Truro Sign Code

Fee: $25.00

Applicant Name: _____ **Date:** _____

Applicant Contact Information: _____

Mailing Address

_____

Phone Email

Number of Signs Requested: _____

Temporary Sign Dimensions: Height _____ Width _____ **Please attach a "to scale" copy of the proposed sign(s).**

Location(s) of Proposed Temporary Sign(s): _____

_____

Map(s): _____ **Parcel(s):** _____ **Please use additional sheet(s) for multiple locations**

Date(s) of the Event in Which the Sign is Intended: _____

Date When Sign(s) will be: Installed: _____ Removed: _____

Name and Address of Property Owner(s) Where Temporary Sign(s) to be located:

_____

Name Mailing Address

_____

Phone Email

_____ _____

Applicant Signature Date

_____ _____

Owner Signature (which also authorizes the use of the property) Date

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Planning Board Action: **Approved** _____ **Approved w/Conditions** _____ **Denied** _____

Conditions:_____

Board Signature:_____ Date: _____

Title

CC: Building Commissioner, Board of Selectmen